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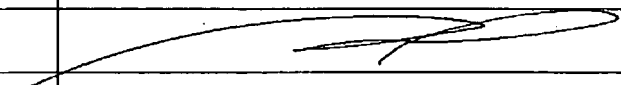
Please type a plus sign (+) inside this box →

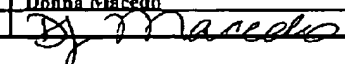


PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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<h2 style="margin: 0;">TRANSMITTAL FORM</h2> <p style="margin: 5px 0;"><i>(to be used for all correspondence after initial filing)</i></p>		Application Number		10/057,846	
		Filing Date		January 25, 2002	
		First Named Inventor		ROSCELLEY, CALVIN	
		Group Art Unit		1624	
		Examiner Name		Kahsay Habte	
Total Number of Pages in This Submission		4	Attorney Docket Number		SMAR-020
ENCLOSURES (check all that apply)					
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fees Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)		<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): USPTO Credit Card Payment Form 2038	
		Remarks			
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT					
Firm or Individual Name		BRET E. FIELD, Reg. No. 37,620			
Signature					
Date		February 28, 2005			

CERTIFICATE OF FACSIMILE TRANSMISSION			
I hereby certify that this correspondence is being facsimile filed under 37 C.F.R. §§ 1.6(d) and 1.8(a)(1)(b) addressed to: (703) 872-9306 on this date: February 28, 2005.			
Typed or printed name		Donna Macedo	
Signature			
		Date	February 28, 2005

Burden Hour Statement: This form is estimated to take .2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, P.O. Box 1450 Alexandria VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: P.O. Box 1450 Alexandria VA 22313-1450.

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VIA FACSIMILE
(703) 872-9306

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) Address to: Mail Stop: Commissioner for Patents PO Box 1450 Alexandria, VA 22313-1450	Customer Number	24353
	Application Number	10/057,846
	Confirmation Number	1574
	Filing Date	January 25, 2002
	First Named Inventor	ROSKELLEY, CALVIN
	Examiner Name	HABTE, KAHSAY
	Group Art Unit	1624
	Attorney Docket	SMAR-020

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This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

- ☐ One month (37 CFR 1.17(a)(1)) \$ _____
☒ Two months (37 CFR 1.17(a)(2)) \$ 450.00
☐ Three months (37 CFR 1.17(a)(3)) \$ _____
☐ Four months (37 CFR 1.17(a)(4)) \$ _____
☐ Five months (37 CFR 1.17(a)(5)) \$ _____

- ☒ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$225.00 LESS ONE MONTH EXTENSION FEE PAID ON 01-13-2005. THE RESULTING FEE IS NOW \$160.00

The Commissioner is authorized to charge any fees which may be required, or credit any overpayment to Deposit Account 50-0815. If additional fees are required, including extensions of time, please consider this a petition therefore.

- I am the:
- ☐ applicant/inventor
☐ assignee of record of the entire interest.
 See 37CFR 3.71. Statement under 37 C.F.R. § 3.73(b) is enclosed.
☒ attorney or agent of record

Respectfully submitted,
BOZICEVIC, FIELD & FRANCIS LLP

Date: 2-28-05

By: [Signature]
Bret E. Field, Reg. No. 37,620

BOZICEVIC, FIELD & FRANCIS LLP
 1900 University Avenue, Suite 200
 East Palo Alto, California 94303
 Telephone: (650) 327-3400
 Facsimile: (650) 327-3231

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01 FC:1252 290.00 DA 160.00 OP

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PTO/SB/17 (12-04)

Approved for use through 07/31/2008. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known	
FEE TRANSMITTAL For FY 2005		Application Number	10/057,846
		Filing Date	January 25, 2002
		First Named Inventor	ROSSELLEY, CALVIN
		Examiner Name	HABTE, KAHSAI
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Art Unit	1624
TOTAL AMOUNT OF PAYMENT	(\$ 160.00)	Attorney Docket No.	SMAR-020

METHOD OF PAYMENT (check all that apply)

- ☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____
- ☒ Deposit Account Deposit Account Number: **50-0815** Deposit Account Name: **Bozicevic, Field and Francis LLP**
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
- ☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
- ☒ Charge any additional fee(s) or underpayments of fee(s) ☒ Credit any overpayments
under 37 CFR 1.16 and 1.17

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
HP = highest number of total claims paid for, if greater than 20						
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)			
HP = highest number of independent claims paid for, if greater than 3						

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x		

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: Extension for response within second month less one month paid on 1-13-05

Fee Paid (\$)

160.00

SUBMITTED BY		Registration No.	Telephone (550) 327-3400
Signature		(Attorney/Agent) 37,620 83/61/2605	RRUNER 8888888 568615 16057846
Name (Print/Type)	Bret E. Field	Date	02/28/2005

This collection of information is required by 37 CFR 1.138. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection of information is not required to be provided to the public, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. 160.00 DA 160.00 OP

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.